

## **Radio-Talkshow at Voice of Kigezi, 14. 8. 12 (9 PM - 10 PM)**

Participants: Rovence (nursing officer psychiatry), Gad (public health officer), Kaguriro (chairman of Epilepsy Support Association Kabale Branch), Marie (student researcher in Social and Cultural Anthropology)

#00:00:04-6# Advertisement: Have you been knowing that ensimbu is a disease, that disturbs very many people and they fear to talk about it. Do you know any person who is suffering from this disease. That ensimbu is a disease and is not caused by spirits. Ensimbu can be treated and a person can be cured for life. Children with ensimbu can be treated and they can even go to school. We should all try to help people with ensimbu. And we see that they get treatment from the hospitals. Remember that ensimbu is not contagious, you can help a person with it. People with ensimbu have created an association, you can go to your nearest health centre. (two times!)

#00:01:55-0# Musa (Moderator): (Introduction) You already know what has brought me here, because you have heard the advert, we have come to talk about ensimbu and ebiyaga. You listeners, even if you agree or disagree with me, if I am talking in public and you see me falling down and even if a thousand people are surrounding me, in a few seconds you will just see none of them. If you are lucky, you may find that ten are still there. But what brings that? (Repeating aspects from the advert.) This is not the first time to be here to talk about ensimbu. They have been here talking about what causes it, how you can treat it, especially those with it and how it can be prevented for those who don't have it. My name is Musa (repetition of the sentences before). We all have everything, but its not me but them, who are gonna talk about the exact things. Experts are already here with me who will be talking about the whole program. Those people who are already here, they can come close to the radio..you may even not having now ensimbu, but it might be even funny on your wedding there, they see you falling there. Prevention is better than cure. In the studio we have the doctors, the experts and people who know about ensimbu and ebiyaga. They have come to talk about them and at the end you might learn one or two or three things that you didn't know. Allow me to introduce them to you. Ladies first. Let me hope Gad, that you don't think that I have left you. Let the nurse first introduce herself. You're welcome.

#00:04:12-0# Rovence: Thank you Musa, thanks for hosting us in the studio, I'm called Rovence and I am an nursing officer psychiatry, the one who studied about madness, which was related to treating people who are disturbed with the brain, which is also related to the people with ensimbu. Thanks for hosting us in the studio and for the listeners they should listen carefully.

#00:04:37-6# Thank you Musa, my name is Maria and I am a student from Switzerland in Social and Cultural Anthropology, and I've been doing research about epilepsy here in Kabale already last summer for two months and this summer again for about one month. (Musa translation: She has come to talk about her research about epilepsy. She will be telling us more later. And we

have great men here who are doctors)

#00:05:13-8# Gad: Thanks so much Musa, dear listeners, my name is Namara Gad, I'm a doctor at Muko health Centre IV and a public health officer, my post in Muko is as a health assistant. I have studied BA of Science in public health, in the topics I studied also community health and mental health. Things about ensimbu, things about the brain, so I am an expert in those things.

#00:05:48-9# Musa: In the studio we have another person, he has been here and he is now back.

#00:05:53-1# Kaguriro: Thanks Musa for hosting us in the studio of VOK, thanks to the listeners who listen again, my name is Kaguriro Vincent, in Kabale I work as the chairman of Epilepsy Support Association Kabale Branch. I greet you all and we give you what has brought us here.

#00:06:21-2# Musa: You've heard all the people that are here with me. So today we are trying to see how we can treat ensimbu and ebiyaga and how we can prevent them. So Gad, let me start with you. So maybe somebody might be out there, hearing about ensimbu, what does it mean? Epilepsy, what is epilepsy? Ebiyaga and ensimbu, what are they?

#00:06:45-3# Gad: Thank you Musa, Well, ensimbu is one of the diseases that attacks people's brain. And we have a list of diseases that attack people's brain. So among those diseases, ensimbu is one of them and it is the one that is somehow neglected. People think that it is a disease that comes from satans. Others think, that somebody was cursed. Others can even hide or even run away from people with it. Because when he's near, he can also have that disease. There are some people who think, that if somebody is going to get it and he falls down, when he gazes it can also get you. But it is a disease and the doctors have the medicine for it. And even the medicines are in the hospitals but people don't know that medicines are there. Sometimes they don't come even to get it. And if somebody would want to come, he fears that people would know that he is suffering from ensimbu. It is a disease that can be treated in hospitals and it affects the brain. And it is not contagious, because it affects the brain. And you can't say that a disease can jump from one person's brain to another person.

#00:08:10-2# Musa: The listeners would want to know, why ensimbu is a problem.

#00:08:16-3# Gad: Ensimbu, as it has been said by the chairmen of the association, it's a problem in Uganda, because, that so far in the district in Kabale, we have more than 150 PWE. Those that are registered in the association of epilepsy and who are on medication. Within those 150 people, you might find that somebody is having a child, when that child is sick, so that means the whole family is affected. If a man is having it, that means, it affects the wife and the children. 150 people are the ones who are registered, so there

are even some people who are behind, who have not come for treatment. So when they bring all the people with ensimbu, that means we have a big problem in Kabale District. We really don't know the problems that we have, since other people are hiding.

#00:09:27-8# Musa: Thank you Gad, we shall come back to you later, thanks for studying about madness, but they advised us not to say that it is madness, but we should call it like mental health problems. So as Gad has said about ensimbu, let me go to Rovence: how is it being reduced? how is it being managed?

#00:09:41-4# Thanks a lot Musa. People who get mental problems or people who suffer from ensimbu, It thank the government who has tried to care much about them. More especially they have tried to do research about these mental problems, as you hear that they are researching about nodding disease. Up to now, there is no medicine for it. But about ensimbu they have tried a lot. In the hospitals, they have medicines. We have the way we start with, so that even a person who is at the smallest health unit, can get treatment. But people have neglected it. But we have tried a lot and I know that each health center, there is a person, who treats ensimbu. People with mental problems, they sent us there to health units, and we are paid by the government. Medicines are there, we don't buy it like using my own money, Musa, the medicine is there, but we don't have people to give it to them. Few people that have come, have got advises and one of the few people that have joined the association. Because people who don't come, don't know the use of the medicine, they are behind there, we call it shadow. To stay in the shadow or to live in the shadow of fearing, hating yourself, while the treatment is there. We have the medicine and we put a system where a person starts from the first health unit, the second, which we use to call dispensaries long time ago, you also find the medicines there. And when you find the medicine is about to expire, they bring them back to us to health centre IV, because we are the one who get a big number of the people who have ensimbu. Musa, we have many patients, they are treated, they get cured, except those, who don't come. But I want to thank very few people, who try to help us, like that public health person, who try to teach people, because for us we teach them at the hospital, but you find sometimes you don't have facilitations or something to help you up to their homes. You go house to house looking for those people. But those who studies about public health, they help us in churches, burial ceremonies, they talk and they inform people and we get those people at the health centers. And people who have got treatment and who get cured, they have helped us to bring other people. Me, I always have clinic, especially on tuesdays and thursdays, but I divided them, because they are very many, you find that every clinic you get 80 people. This disease is not contagious. When a person gets the fits (direct: when a person dies), people run away from him or her. But I usually wonder I have been treating them, I've never got that disease, it has never been transmitted to me. So patients get cured, it is not contagious, we tell people, that this disease is not contagious. Some people hide their patients, they close in houses, some keep them as tourist attractions, they

keep them to show, they have people who "die", to have fits like this. But now people they get treatment, they get cured, we have medicines and we try a lot.

#00:13:13-6# Musa: Thanks Rovence, she was saying that don't hide that person. that don't hide a child, don't hide a wife, but you bring them, because the treatment is there, you get cured and he becomes a normal person. But before I leave you Rovence, I want you to tell me the signs and symptoms. Because it is very important to know the signs and symptoms, that this person is about to get the fits.

#00:13:39-9# Rovence: A person, more especially we say, that it starts when you are still a child, when you are still like a baby, like early ages. That in 8 months, one year, very many people usually come and say that my child has convulsions ("okwesika"). I don't know if you have heard of that word, it is not common. So most of the times, when they come, saying that my child has convulsions, we first treat other diseases like malaria and other diseases that makes a child having convulsions. But we tell her, that when we give you this medicine, and you use it after three days, or four, and your child gets again the convulsions, you should bring them back to us. And when she brings back the child, and she says that the child again "died", that he's not having cough, that he's not having fever, he's not having any disease, but got the convulsions again, these people we start them with the medicine. But more especially, these are the things that happen to them, most of them, they tell you that in old people, they are those they left, that they took them to pray to them, to traditional healers, but they failed and you grow with that disease. Those old people tell you, when I am there I smell bad things, I smell something like sewerage. Those are one of the signs that he is about to get the fits. --> **kukaba (literally: dying / used for: having fits)** And other people feel wind, too much wind, like blowing in his brain. That's how they tell you, even in what we studied is what they told us. Some after hearing them or smelling them, he falls down, some people urinate on themselves, other people they defecate on themselves, bite their tongue, there is the way they pull or push their arms and legs, in the way of like jerking, (pulling) the head up and down, but he doesn't know what's happening. In a few minutes, even not more than three or five minutes, some people come back. And when he's back, some know, what has taken place, there's a person who comes back and knows that something has happened to him, there's someone who comes back and doesn't know what has happened to him. Even if it is near the road, he stands up, he cleans himself, he removes the dust, then he goes back on the path, he stops a taxi and he continues his journey. Not knowing what has happened. Then there are those who die. We have different types of ensimbu. And those types, everyone has the way he dies. We have those whose arms shake, like when he's holding like a cup and it falls, when you are at home and you see a child breaking a cup, a plate, breaking this and that, then you wonder what's happening to you. A child has a type of ensimbu, but you as a parent, you can not know it. So there are very many types, and in those types, that's what happens to them. Those are most of the things that happen to them. I don't have God has something to say.

#00:16:50-1# Musa: Gad will add in later. I will ask Gad after Maria. If the person gets the fits and you're close to him, what should be done? Let's first go to Maria, dear listeners, Maria, as you've heard, is a student from the University in Switzerland, has been in Kabale making research about ensimbu. So she's going to tell us about what she has researched.

#00:21:58-7# Marie: At this point, I'd like to give an input from my research... the focus will be on the two concepts of ebiyaga and ensimbu, which concerned me through my whole research and which I think is important to discuss on the radio, as this information could be relevant to anyone.

During my research talking to PWE, I came across the word ebiyaga besides the official term of epilepsy, which is ensimbu. People mentioned this name when I asked them if they know or use other names for epilepsy or if they know conditions with similar signs and symptoms. So I tried to find out more about the differentiation and the connection between these two local concepts and related practices. Soon I found out that there are different perceptions about ebiyaga and ensimbu and that there is often a lot of confusion how these concepts are related to each other.

Whereas there are people who think that ebiyaga and ensimbu is actually the same, there are others who think that these are quite different kinds of conditions. So in what follows I try to outline some of the perceptions about ebiyaga and ensimbu, which I came across in the communities.

People who differentiated between the two conditions mentioned for example the age factor. Ebiyaga was said to be common in children and when ebiyaga is not treated in childhood, it can lead to ensimbu, when the children grow up.

Referring to the issue that ebiyaga can proceed to ensimbu when not treated, ebiyaga is also described as the primary stage or a mild form of ensimbu. In addition, ensimbu is seen as the more serious condition as it is more dangerous for the person concerned and more complicated to treat.

Regarding signs and symptoms of ensimbu and ebiyaga, most people mentioned that they have similar ones, but that they are not the same. The most important difference was, that there is no falling in ebiyaga compared to ensimbu. Other signs and symptoms that seem to be experienced often in ensimbu are "uncontrolled passing gas, urinating or defecating". These were also explicitly said to be missing in ebiyaga.

Ebiyaga was mostly described as having convulsions, sometimes in connection with high temperature. When a child for example has malaria or any high fever, it can develop febrile convulsions, which can lead to absent-mindedness or unconsciousness.

Regarding the treatment of the conditions there is an often mentioned differentiation. If you have ebiyaga you go to the traditional healer or herbalist, but if you have ensimbu you go to a hospital or health center.

I can give an example which is typical for a lot of my participants:

A mother of a 13 year-old boy first went with her son to a traditional herbalist. Because neighbors told them that her son is having ebiyaga and that treatment should be received from traditional herbalists. But as the traditional treatment

didn't help, they took him finally to the health center to seek medical treatment. The diagnosis revealed that their son was having ensimbu.

With ebiyaga there was often made a connection to spirits or satan, so that's why a lot of people go to traditional healers first. I learnt about some references about the connection of ebiyaga to spirits. Some people mentioned that the word ebiyaga comes from the word omuyaga, which means wind or air. And they told me that people think that the moving winds contain spirits that can take possession of people.

So these were some of the differentiations I came across when researching about ebiyaga and ensimbu. But I need to point out, that there were numerous, sometimes contradictory statements regarding the differentiation, and the boundary between the two concepts is somehow vague for a lot of people.

But the question, if the condition is defined as ensimbu or ebiyaga, has a big influence on where someone will go to seek treatment. Therefore it is relevant regarding the question of sensitization.

I learnt, that from the perspective of health workers, ensimbu and ebiyaga is the same condition, both is epilepsy.

So I think it is important that the trained medical people here can speak to the listeners and give their view about these two conditions. And as well we have the chance to listen to a person with epilepsy and his own experiences with ebiyaga and ensimbu.

#00:21:58-7# Musa: Dear listeners, Maria is a student as you've heard, and as she has been doing research she came across two words ebiyaga and ensimbu, I want gad to help us to talk about those words very quickly as we open for the lines for the callers. So that they can tell us, if there is any difference between these two words. Gad, Maria has talked much, but you can summarize.

#00:22:20-7# Gad: Thanks Musa, also thank you Maria for your research, because it's the best of our being here to explain and to sensitize the communities about those different things. Musa, as she has said, ebiyaga and ensimbu, when we go to our people in the villages, we get different views, which doesn't show that it is one disease. Previously, I was doing some injections in Muko, having a immunization outreach. Out of eight women that I asked, I found that five said that ebiyaga is a disease of children. And that disease can be treated in villages with traditional herbalists. There is the way, they do it to them, there are some things they smear on them, they make some cuts. There are some, they put there shoes, so that the ebiyaga can go to those shoes and go, it goes to where they have thrown that shoe. So that shows, that they don't know, that ebiyaga is ensimbu which is still low, in its first stages, which is still growing. Ebiyaga is a disease that grows with a child. As a child grows from one stage to another, ebiyaga also develops from one stage to another. And at the end, it ends up to ensimbu that makes a person fall and starts jerking and urinating. And one difference she has said, that some people say that they urinate, defecate, that they start foaming, they die. When a person starts having convulsions, the muscles contradict. When the muscles contradict, the gall bladder, it is also contradicted by

the muscles, because there are muscles, that are connected to the meat. So when the muscles contradict so much, they also shake the gall bladder, and eventually the urine comes and sometimes feces. Because he's a young child, it's common in children who are below five years. So in that age group, children don't have so much things in the stomach to pass out, he can only urinate to himself, but other stuffs can't come, because he doesn't usually doesn't have that. An old person, because he eats a lot, he'll be having a lot of stuffs in the stomach. So that can make people see that a child with ebiyaga can't result into ensimbu. But as Rovence had said, the stage for young children, that that thing, when you find that a child or a baby is like breast feeding, he leaves the breast and you look at him as if he's like to die. He starts rolling the eyes, he spends like one minute and comes back, starts breastfeeding again. You women can't realize that a person has a problem, you see that my baby has stopped breastfeeding, that something that scared him and he started breastfeeding again. Or you sent your child to bring a cup, he brings it, when he's about to give it to you, then it falls from his hand. It's one type of epilepsy, but the person with that child, who didn't study about it, doesn't really realize. He doesn't realize that it is a disease. And when it is advancing, it ends up becoming that disease ensimbu. It has an English name, in medical term, it's grand mal epilepsy, which is advanced. And ebiyaga, the other stage when epilepsy is still growing, it is called petit mal epilepsy and it is common in children. It's the one that we can classify as ebiyaga. Rovence can add something about it.

#00:26:17-8# Musa: Rovence, as Maria gave us the story about that 13-year old boy, that you tell us, what happened to that boy.

#00:26:21-8# Rovence: This child of 13, to take him to the traditional healers, it was an advise from the neighbor. He showed, that when he goes there, it can help him. It can help him more that going to the hospital. And he explained what ot really meant as he knew it. Musa, if I'm not a member of parliament, I can't tell you about the parliament, because I really don't know what's taking place there. We can make mistakes when we talk about it. So I think, the person who told him about that story, knew it like that. And that's the word he was using. When they came to the hospital, they told him that he has ensimbu. So I think he was a bit confused, because the other person said it was ebiyaga and in the hospital they said it was ensimbu. But I want to tell you that, where we are coming from, omukiga, omuyankore, omukono, there's the way we take things. When we are in this side (Kabale), they say that "amahuri g'enkiga" (eggs from the Bakiga), then you say, when you go to Ankole, you say "amahuri g'enyankore" (eggs from the Banyankore), then you go to Buganda, they say " amahuri g'enganda" (eggs from the Baganda). So I think, everyone in his culture, there's the way he calls it. Today I've got one lady, Maria came on Tuesday, every Tuesday she used to ask me, can you differentiate for me between ebiyaga and ensimbu? What are the people's view? When I was having a clinic, I would try to ask people, so today a woman told me, that a child has a lizard in the head, when it starts growing, it develops a tail, when the tail grows, it starts moving the tail in the child's head, so when it starts moving or rotating, the head starts moving. So surprisingly, that boy had a big scar. When I tried to ask him, she took him to the traditional healer. The traditional healers should try to remove the lizard, because he had

a big scar. So I think that ebiyaga or ensimbu, it's one word. But the way we take it, it's what gad had said, it is still in low stage. As you find a young child can not be like an old one. Ebiyaga and ensimbu they have no difference. Because when you come and you say that it is ebiyaga and you start giving him medication, you are cured. And when you say it is ensimbu and I give you the medicine, you are cured too. So that means the word is one, but it's we who differentiate it.

#00:29:09-7# Gad: Musa, that thing of the tail of the lizard, I heard it when I was in Fort Portal. We had an outreach. When we were interviewing patients, they told us, that what makes a person to fall down, that the tail of the lizard touches or hits in the corner of the brain. When it disturbs the head of a person, then a person falls down. It is the tail that will be itching him in the head. But they have people who give them the herb that makes that lizard die inside the head. Then the person will not fall down again. So you see that people pass through many problems. And when a person hears some things from another place, he can say that they have some traditional healers who can cure that disease, who can kill that lizard. When they take him they say that they can kill that lizard while it is not true.

#00:30:09-7# Musa: My listeners, you've heard the two words Maria came across while making her research. Ebiyaga and ensimbu. Each person takes it or knows it in a different way. As you have heard Gad trying to explain and Rovence, they say some people think that ebiyaga, that they pass through the wind which has spirits and the spirits enters you. And you eventually fall down. So people in the studio want to know through you. For you, what do you know about ebiyaga and ensimbu? How can you differentiate them? or what can you talk about them? How do you know ebiyaga and ensimbu? That's what I want you to tell me at this particular moment. I have Kaguriro here with me, he's going to talk about his own experiences. You tell us, how do you take ebiyaga and ensimbu? (Phone number) You tell us the way you know about these two words as Maria has come across them in her research.

#00:31:24-3# Vincent from Kebutakuri: Me, I know that ebiyaga and ensimbu are the same. Musa: Why? Vincent: A person suffering from ebiyaga and ensimbu, the disease is the same.

#00:31:57-2# Johnson: For ebiyaga when a child is about to "die", it attacks one part of the body. And for ensimbu, if he is like near the fire, you can fall into it. Musa: He falls down like the whole body? Vincent: Yes. Even old people can get ensimbu? In which centres can we find medication? Because I know some people who have ensimbu and normally go to health centres and don't find there the medicine. Is there any specific hospital for ensimbu?

#00:33:03-2# Musa (time for questions later, now difference between ebiyaga and ensimbu)

#00:33:18-7# Ronald from Ntungamo: As the first caller said, for ebiyaga it



attacks the whole body, for ensimbu it is only one side (was meant vice versa).

#00:33:49-8# Habasa from Kabasheeshe: I want to ask those health workers like Rovence, can you get ensimbu at the age of 20? Musa: Habasa, can you tell us....

#00:34:16-5# Rwanku from Ibumba: Ebiyaga and ensimbu are the same and I am one of the person who can treat them using herbs. Musa: you personally? Rwanku: Yes! When he gets such diseases, I cure it. Musa: And he's cured? Rwanku: Yes. There is a child who came here and I cured him.

#00:34:53-9# Eddie Mugisha from Rwamucucu: For ebiyaga you be there and you see a child shouting, keeps shouting, and ensimbu a person may be with people in a public place, when he sweats, he can fall down.

#00:35:24-0# Medard from Nyakyeru: (wanted to ask)

#00:35:52-7# Matovu from Ntungamo: For ebiyaga a child's eyes start rolling and falls down. For ensimbu a person starts foaming up to the end. (asking about VOK MTN line, when wanting to send a message)

#00:36:24-5# Matsiko from Katojo: If you are with a person with ensimbu and he falls down...

#00:36:53-4# Justus from Kamwezi: For ensimbu it attacks people who are old, and for ebiyaga is for young children. That's how we differentiate ensimbu.

#00:37:18-3# Byaruhanga from Kanungu: Me, I think to differentiate those two things, those people who are in the studio are the experts who should be like telling people. Musa: For us, we wanted to know, who do you take them, how do you know them. As I hear people seeing it as spirits and what..how do you take it?

#00:37:51-5# Musa: The experts are here to tell you, you wait, they will let you know. Thanks to all our callers, because of your questions, I think Maria will say something after that and Rovence. But before that, let's go to Kaguriro to tell us your experience about the disease ensimbu. Life story about our friend Kaguriro.

#00:38:17-8# Kaguriro: My name is Kaguriro as you've been told, I thank the doctors for having explained about ensimbu and to differentiate ebiyaga and ensimbu and to see how we take them. The way I have been with this disease we found that it is the same. Because I got it 1997. There was no medicine by that time. We got the medicine 1998 from Denmark. There were no expert to make these medicines from Uganda by then for ensimbu. But I used to fall down, many people know me in town, because I am not a man who is not recognized. Many people know me, they understand me, I came and started the medication. When I used it, I could not fall down anymore. I was good. But

to be good, there came an association for people with ensimbu. So that we can unite together and we can support ourselves. In that organisation we were led by Mugarura Augustine, he's the one who tried to start this thing and it became useful to us and we succeeded. I thank the government of Uganda, because with this disease, it has done so much. Because when they found that it was a big problem, they tried to train the health workers, who can deal this disease of ours. From then, we started the medication, we formed a group and existed and it worked properly. And when I was starting to get this disease, dear listeners, I was a big man, I had a family, I had children, then I started getting that disease. But when I was with it, I moved up and down looking for what can save me. I even used those herbs that they have been talking about, that couldn't help me. What helped me is when I started using the medication from the hospital. I used it, that's when I was healed. I'm no longer a patient. Because when I started using medicine, I didn't fall down anymore. But I used to have convulsions (not stable). But it also went away. What are our aims of having an association?

#00:41:17-8# Musa: As we are concluding...

#00:41:21-3# Kaguriro: Our aims, that those people who have not known the advantage of visiting the hospital, we can teach them, but I'm not a doctor or what, but I can tell them to visit the hospital and get the medicine. Another thing, we give hopes to a person with ensimbu that he can also live like any other person. He can do something that can make him earn a living. For himself and even the whole family. Those are our aims. I thank because with that we have gained from the local government because it has sent us some money which we have shared with our groups in the subcounties. They gave us 1.8 Millions, we tried to divide it within our groups. We have our groups, a group in Muko, in Hamruwa, in Rubaya, in Maziiba and in Municipality. We gained in that way from the government. So we are still continuing with our volunteers, who can teach other people especially in the villages, about this disease.

#00:42:48-4# Musa: Thanks Kaguriro, we shall come to you as we are concluding. Gad, I can see time is not friendly. Those who have called in, you've listened to them. You can talk something about them and we see, how we can treat people with ensimbu.

#00:43:02-8# Gad: Thank you very much, Musa, those who have called, thank you very much, because this shows that you've been listening to us and you are with us in this program. The first caller, Vincent from Kebutakuri, the way to my place Murubanda, he said that they are all the same. Ensimbu and ebiyaga, he has said, that they are the same. It's one disease. So he has, I think, some knowledge about that. Then Johnson from Kazaho, he has said that for ensimbu, that a person falls down, but in ebiyaga you get attacked by one side. Even another caller said that one side is for ensimbu, so you have seen that they are not the same, they are contradicting themselves. So that means, almost all of them, that their understanding of ensimbu and ebiyaga is the

same, but they keep contradicting.

#00:44:04-9# Musa: So at the end, we shall let Rovence to summarize and we see how we can save a person with ebiyaga.

#00:44:14-8# Rovence: Thank you Musa, the people who have asked questions, we thank them very, very much. All of them were talking about one thing and which we have discussed about. But we said that it has types, very many types, epilepsy. There is one who dies and falls down, then he throws the hands as if he's dying. We've said that there is some other, who is holding a cup and it falls down. it's also a type of epilepsy. And we have also talked of this type, temporal lobe epilepsy, it affects the frontal part, this bone of the forehead of a person. This bone has many functions, remembering, thinking what we call memory, so many things. So you find that a person has that problem. You can send a child to go and bring a cup, and he can bring you a jag. You say go and bring me a plate, then he brings a knife. And you don't know that the child has a problem.

#00:45:11-0# Musa: Then you beat him..and you abuse him..

#00:45:15-1# Rovence: You say your child, you are a fool, that are the names they call them. So all the questions that they have asked, it was in between the types of ensimbu. A child, the way he gets this disease, sometimes attacking him one side, it's one type. And an old person who is attacked by one side too, there is an old person who is attacked by the whole body. There is a child who is attacked by one side and another child who is attacked by the whole body. There is another person who asked, that man called Rwanku, he has said that he healed a child and he has said that it is his job, thank you very much for healing that person, I have hopes that it was not ensimbu. Because they say that to save death is to go for treatment. There is someone who asked that ensimbu can also attack an old person, that's true. Because you've heard from Kaguriro at what age it attacked him. He had children, he took the medicine and he was cured. So we should prevent when we get accidents, you can get head injuries, and we get brain damage, we get ensimbu when we are old. We get very many problems like loans, you be there and you are disturbed in the brain, you get mad or you get epilepsy. So even old people can get ensimbu.

#00:46:53-7# Musa: Thank you Rovence, my friends, as you've heard from Kaguriro, he got cured and he's now ok, actually we support together Arsenal and we always get pressure together. But I've never seen him falling down. Or to find he was very happy, but I want to ask our friend Kaguriro, people deep in the village, when a person is attacked by ensimbu, what care should we give him, what should we do to him?

#00:47:19-8# Gad: Our people get these problems, but the first care is to first believe that this is a disease and it can be treated. And it is not contagious. It is not like Ebola. Because for a boy, even if it is urine, you say, that now you are also affected, but for ebiyaga, that person falling when you help him or

support him when he's falling down, so that he can not fall badly, that's the first care. There are people you find that they have schools, young children in primary, when he is attacked in the classroom, falling from the chair, even the teacher who was on the black board, he can also jump and run away. But he's the one who should go there and help that child. To see that nothing wrong can happen to that child. This falling down, there is sometimes when you find him falling into stones or on the Veranda, where there is a hard floor, when you're around, you should get like a pillow, and you put it under the head. When they say that you grab him and tie him, sometimes you can injure him. Because he has much energy in those legs and arms. You should put something down, where he can fall, so that he can not keep on knocking his body on hard material. Something that can even damage his head and destroy the brain. Another you find people crushing their teeth, sometimes you can bite the tongue, people with mercy can bring an iron or a spoon and he puts it in your teeth, that can cause harm to him. So you can give him something that is soft, Rovence knows those things that you can put in your mouth, but they are not very many. There is another thing, you can tell families about the disease. Like counseling, that you have medicines from the health centres. And to say that you can join this association of people with epilepsy. Like this one of Kaguriro. You join it and you learn more about this disease.

#00:49:29-7# Musa: Listeners, we are going to receive your calls, if you have a question about ensimbu or you want to give us more information about this disease, this is the right time to pass through. (number) Our friend Rovence will be telling us after all this, what is the secondary prevention and the tertiary prevention. Only one minute, but let me receive the lucky callers.

#00:50:10-5# Francis from Bwama: I have a complimentary. Telling people that what causes it most, they get birth injuries. So they should go to the hospital when they are giving birth. That can help them.

#00:50:43-0# Another: I wanted to ask, they say that for ensimbu it is inherited. If your father had it, you can also get it.

#00:51:08-1# Wilber: If you're about to get the seizures, how do you know, so that it can help you so quickly?

#00:51:22-6# Mujuni from Kyogo: Thanks for the program. Mine is to thank, but I would tell people to always help those people who are attacked by that disease. Not to be a distance from them. We should unite.

#00:51:48-0# Musa: The haters will never be many (Rukiga proverb). Mujuni said love for ever. Ok, Rovence, time is the one that is disturbing us, so you can answer, how we can prevent.

#00:51:56-9# Rovence: Thank you Francis from Bwama, he said that he's a health worker, so he knows what it means by people who give birth from the villages, what brings people o contract ensimbu. There is another person who

asked, if it is inherited. The chances are there, but it is a small percentage. There is the person who asked, how do you know that it is ensimbu? I think they are the things we have been explaining the way the person "dies". I want to thank Mujuni who said that haters will never be many. Thanks so much, let him keep on supporting those people. So I wanted to add to those people listening in, they say that prevention is better than cure. Let them not say that there is stone somewhere and you pass that route. They say that there is a wild animal there and you pass there. Treating our people with ensimbu it will help us from what we are doing and we reduce our problems. When you have a child with ensimbu, there are some works that you can't do, what we call production retardation. He can not go to the garden to dig. Sometimes you leave somebody to take care of him, he needs to eat and even other people need to eat too. So I'm asking people, the big task is with us who take care of these children. Me, I can give you medication, but I can follow you to your home to see how you are taking care of your patient. So a big responsibility is on their side. You can even reach home and throw it or you can give it to your child. So I'm asking people as we know that time is not our ally, that people should put in a lot of effort. And they should not follow those people who are still left behind. This is ebiyaga or ensimbu. They should come, they give them treatment, it is there. They will be cured and live a good life.

#00:54:09-8# Musa: Thanks a lot, our friend Rovence, you can say bye to your people.

#00:54:15-2# Rovence: Thank you Musa, I want to say bye to all our dear listeners, thank you Madam Maria, who has invited us to come and talk to people, because she doesn't understand this language, I want to thank you the management of VOK, thank you so much for giving us this time, and I want to greet a few people, those that I have left home, my children, my husband, my parents from Kabasheeshe, Kayonza, Mr and Ms Kyomukama, I want to greet my mothers in law and fathers in law. I want to greet all people and the staff at Hamurwa Health Centre, thank you, thank you.. and the people who have come here.

#00:54:57-9# Musa: That is Rovence, who is an expert, a psychiatric nurse and she's also a nurse at Hamurwa HC 4.

#00:55:06-9# Gad: Thank you Musa, I also want to thank the management of VOK for giving us this opportunity to come and talk to the people and I want to thank you Maria, as our friend, we appreciate your input, because you are the one who networked. And thank you Kaguriro who came to support us. And I also thank the staff that I have left at Muko HC 4, I'm happy that I left them doing well and give me a chance to come here. And thank my family, Lady Jovia Namara, and our children who are at Hamurwa, and the family of Mzee, my father. And those who stay with me in Kekubo, where I've built, my neighbors...

#00:55:57-6# Marie: First I want to thank the Ministry of Health of Kabale

District for giving me the opportunity to do research here in different health facilities. I want to thank the health facilities I was able to visit for my research: Kabale Referral Hospital, the Infectious Diseases Institute in Kigongi, Muko Health Centre IV, and especially Kakore Health Centre III & Hamurwa Health Centre IV and all the associated people I could interact with. Another thank goes to the Foundation of Disabled People in Kigongi and especially to ESAU, where I have to mention apart from a lot of other people Peter Sabiiti, the national delegate of ESAU, who helped me a lot in gaining access to the field and through him I could build up a lot of relationships. Another big thank goes to Martin & Allan, the two translators who helped me with my research in the field. Then I want to thank Gad, Rovence and Kaguriro for being part in this talkshow and giving information to the listeners. Most of all I want to thank the people with epilepsy and their families who took their time to share their experiences with me, I want to thank all my participants from Rugarama and Kigazi village in Kakore parish and to all the other participants from Kabale District who took part in my research. Last but not least I want to thank the Management of VOK for realising this Talkshow on the radio, Mr. Andrew and as well Cryton who opened this opportunity for us.

#00:57:29-0# Musa: (repeating those things that I said) our friends with people with ensimbu, thanks for helping her...As I conclude...

#00:57:52-6# Kaguriro: thank you Maria, I also thank my wife who was patient in my sickness. And she took care of me. I also thank you VOK to allow us so that we could come and explain the problems that people of ensimbu go through. I ask you Musa, give me a chance and talk to these people to come to the meeting on the 21st (names) at FPD. Thank you a lot, I also thank our conference that is taking place at the church of 7th Day Adventists.

#00:58:55-4# Musa: Thank you Gad, he's a public officer and he's a health assistant at Muko HC 4, Madame Rovence thank you, nursing officer of psychiatry, and thank you Maria who is a student from Switzerland, thank you for the good research and we hope to have more and more of them. Thank you Kaguriro, chairperson of ESAU, Kabale branch, thank you. And thanks to the people who have called and the listeners. At this moment allow me to thank you and love you and we say that a person with ensimbu is a person like any other person. He can get cured, you help him, to take him to the hospital.

#00:59:40-7# (the same advert from the beginning)